



A PPL Company

PART 1

DELAWARE LEVEL 1 INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection
(Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Application & Conditional Agreement – to be completed prior to installation)

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Customer Name: Thomas P Gaske
Mailing Address: 1103 Bunting Ave
City: Fenwick Island State: DE Zip Code: 19944
Contact Person (If other than above): Same
Mailing Address (If other than above): Same
Telephone (Daytime): 301-428-5860 (Evening): _____
Facsimile Number: _____ E-Mail Address (Required): pgaske@hughhes.net

Alternate Contact Information

Name: Astrum Solar
Mailing Address: 8955 Henkels Lane Suite 508
City: Annapolis Junction State: MD Zip Code: 20701
Telephone (Daytime): 410 829 8814 (Evening): _____
Facsimile Number: _____ E-Mail Address: glenn.raniere@astrumsolar.com

FACILITY INFORMATION

Facility Address: SAME
City: _____ State: DE Zip Code: _____
DPL Account # of Facility Site: XXXXXXXXXXXX 50000995303
Energy Source: Photovoltaics Prime Mover: Photovoltaics

Type of Application: Initial ☒ Addition/Upgrade ☐ ¹

DC Nameplate Rating: 3.78 (kW) _____ (kVA), AC Inverter Rating 3.5 (kW), AC System
Design Capacity: 2.91 (kW) _____ (kVA)

¹ Initial if first time generator request. Addition/Upgrade if this is an add-on to a previously approved system.

Generator (or PV Panel) Manufacturer, Model #: Suniva 270 60 4 100

(A copy of Generator Nameplate and Manufacturer's Specification Sheet May Also be Submitted)

Inverter Manufacturer: Enphase Model # & Rating: M250 60 2LL S22

Number of Inverters: 14

Ampere Rating: 1.0 Amps_{AC}, Number of Phases: ☒ 1 ☐ 3, Voltage Rating: 240

V_{AC},

Nominal DC Voltage: 48 V_{DC}, Power Factor: .95 %, Frequency: 62.5 Hz,

DPL Accessible Disconnect or Lock Box: ☒ Yes ☐ No, If Yes, Location: net to meter

One-line Diagram Attached (Required): ☒ Yes ☐ No, Site Plan Attached (Required): ☒ Yes ☐ No

Do you plan to export power?² ☒ Yes ☐ No, If Yes, Estimated Maximum: kW_{AC}

Estimated Gross Annual Energy Production: kWh

Is the inverter IEEE/UL1741 lab certified? Yes ☒ No ☐ (If yes, attach manufacturer's cut sheet showing listing and label information from the appropriate listing authority, e.g. UL 1741 listing. If no, facility is not eligible for Level 1 Application.)

Estimated Commissioning Date:

EQUIPMENT INSTALLATION CONTRACTOR Check if owner-installed ☐

Name: Astrum Solar

Mailing Address: 8955 Henkels Lane Suite 508

City: Annapolis Junction State: Md Zip Code: 20701

Telephone (Daytime): 410 829 8814 (Evening):

Facsimile Number: E-Mail Address (Required): glenn.raniere@astrumsolar.com

ELECTRICAL CONTRACTOR

Name: Astrum Solar

Mailing Address: 8955 Henkels Lane Suite 508

City: Annapolis Junction State: Md Zip Code: 20701

Telephone (Daytime): 484 388 1511 (Evening):

Facsimile Number: E-Mail Address: john.teti@astrumsolar.com

License number:

Active License? Yes ☒ No ☐

Is small generator facility eligible for Net Metering? Yes ☒ No ☐

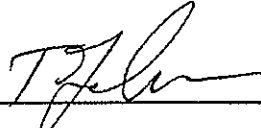
² Yes, if your expected maximum output of the inverter (kW AC) is greater than the lowest load you anticipate at your facility during maximum PV output (kW). The difference would be the amount you may export.

INSURANCE DISCLOSURE

The attached terms and conditions contain provisions related to liability and indemnification, and should be carefully considered by the interconnection customer. The interconnection customer is not required to obtain general liability insurance coverage as a precondition for interconnection approval; however, the interconnection customer is advised to consider obtaining appropriate insurance coverage to cover the interconnection customer's potential liability under this agreement.

CUSTOMER SIGNATURE

I hereby certify that: 1) I have read and understand the terms and conditions which are attached hereto by reference and are a part of this Agreement; 2) I hereby agree to comply with the attached terms and conditions; and 3) to the best of my knowledge, all of the information provided in this application request form is complete and true. I consent to permit the PSC and interconnecting utility to exchange information regarding the generating system to which this application applies.

Interconnection Customer Signature:  Date: 1/15/15
Printed Name: Thomas P Gaske Title: Owner

Conditional Agreement to Interconnect Small Generator Facility (for EDC use only)

Receipt of the application fee is acknowledged and, by its signature below, the EDC has determined the interconnection request is complete. Interconnection of the small generator facility is conditionally approved contingent upon the attached terms and conditions of this Agreement the return of the attached Certificate of Completion duly executed, verification of electrical inspection and successful witness test or EDC waiver thereof.

EDC Signature: _____ Date: _____
Printed Name: _____ Title: _____



A PPL Company

PART 2

DELAWARE INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection

(Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Final Agreement – must be completed after installation and prior to interconnection)

Certificate of Completion

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Name: Thomas P Gaske
Mailing Address: 1103 Buting Ave
City: Fenwick Island State: DE Zip Code: 19944
Telephone (Daytime): 301-428-5860 (Evening): _____
Facsimile Number: _____ E-Mail Address: pgaske@hughes.net

FACILITY INFORMATION

Facility Address: SAME
City: _____ State: DE Zip Code: _____
DPL Account # of Facility Site: ~~357607899972~~ 50000995303
Energy Source: Photovoltaics Prime Mover: Photovoltaics
DC Nameplate Rating: 3.78 (kW) _____ (kVA), AC Inverter Rating 3.5 (kW), AC System
Design Capacity: 2.9106 (kW) _____ (kVA)
Inverter Manufacturer: Enphase Model # & Rating: M250 60 2LL S22
Number of Inverters: 14

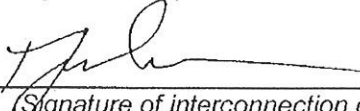
EQUIPMENT INSTALLATION CONTRACTOR

Check if owner-installed ☐

Name: Astrum Solar
Mailing Address: 8955 Henkels Lane Suite 508
City: Annapolis Junction State: Md Zip Code: 20701
Telephone (Daytime): 410 829 8814 (Evening): _____
Facsimile Number: _____ E-Mail Address: glenn.raniere@astrumsolar.com

FINAL ELECTRIC INSPECTION AND INTERCONNECTION CUSTOMER SIGNATURE

The Small Generator Facility is complete and has been approved by the local electric inspector having jurisdiction. A signed copy of the electric inspector's form indicating final approval is attached. The Interconnection Customer acknowledges that it shall not operate the Small Generator Facility until receipt of the final acceptance and approval by the EDC as provided below.

Signed:  Date 1/15/2015
(Signature of interconnection customer)

Printed Name: Thomas P Gaske

Type of Application: New/Initial ☒ Growth/Increase ☐ System Capacity 3.78 KW (DC)

Check if copy of signed electric inspection form is attached ☒

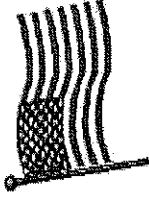
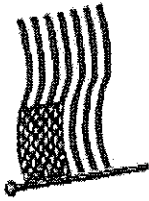
ACCEPTANCE AND FINAL APPROVAL FOR INTERCONNECTION (for EDC use only)

The interconnection agreement is approved and the Small Generator Facility is approved for interconnected operation upon the signing and return of this Certificate of Completion by EDC:

Electric Distribution Company waives Witness Test? (Initial) Yes (BCD) No (____)
If not waived, date of successful Witness Test: _____ Passed: (Initial) (____)

EDC Signature:  Date: 8/11/15

Printed Name: Diana C. DeAngelis Title: Reg Affairs Lead



AMERICAN INSPECTION AGENCY, INC.

Approval is issued after completion of visual / final inspection in accordance with the National Electric Code (NFPA 70) applicable governmental, utility, and/or any state or local amendments there to.

CERTIFICATE OF INSPECTION

DATE: July 23, 2015
OWNER: Paul Gaske
OCCUPANT: Dwelling
LOCATION: 1103 Bunting Ave, Fenwick, DE
TYPE OF OCCUPANCY: Single Family Dwelling
INSTALLED BY: Roberts Electric Inc.
EQUIPMENT: 3.7 KW Solar Associated Electric Only

This certificate applies to the electrical wiring to the electrical equipment listed above and/or on application along with the installation inspected as of the above noted date based on visual inspection. Should the electrical system to which this certificate applies be altered or changed in anyway, including but not limited to the introduction of additional electrical equipment and/or the replacement of the components installed as of the above noted date, this certificate shall be immediately null and void. This certificate applies only to the use, occupancy and ownership as indicated herein. Upon a change in the use, occupancy or ownership of the property indicated above, the certificate shall be immediately null and void. No warranty is expressed or implied as to the mechanical safety. This certificate shall be valid for a period of one year from the above noted date.